



Section Two

*Who Visits SBHCs
& Why*

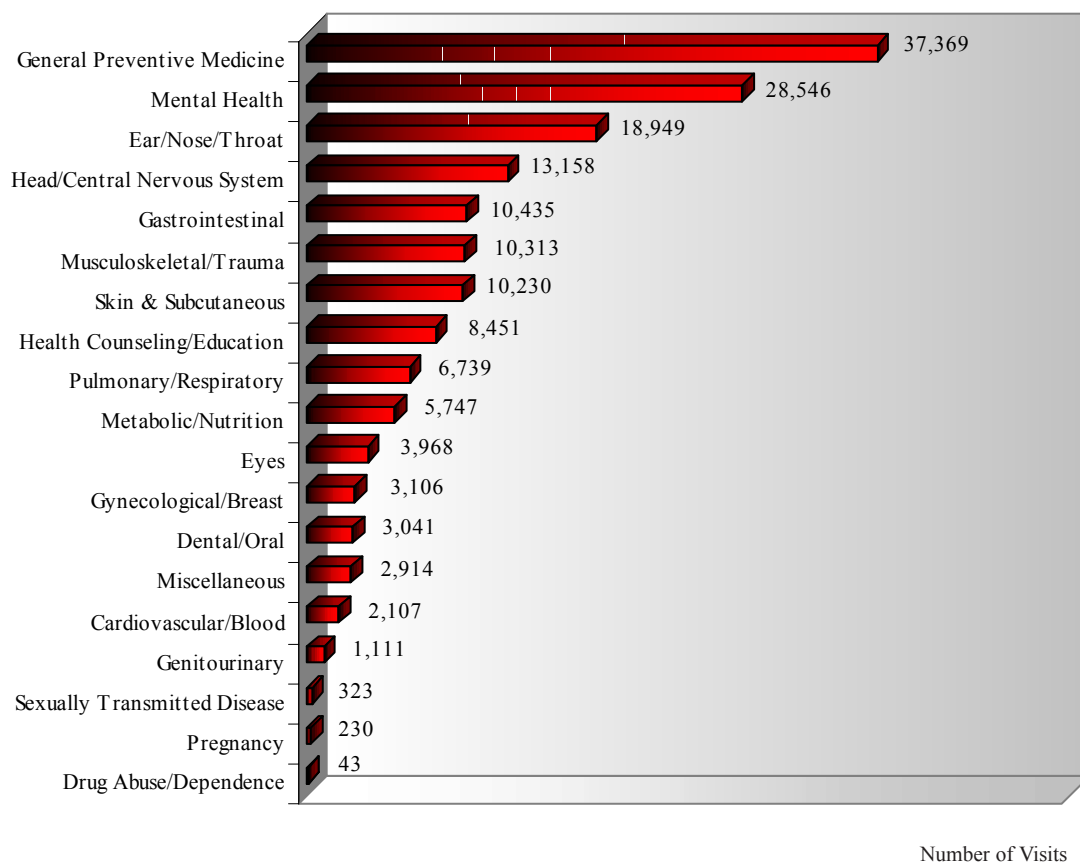


Louisiana School-Based Health Centers

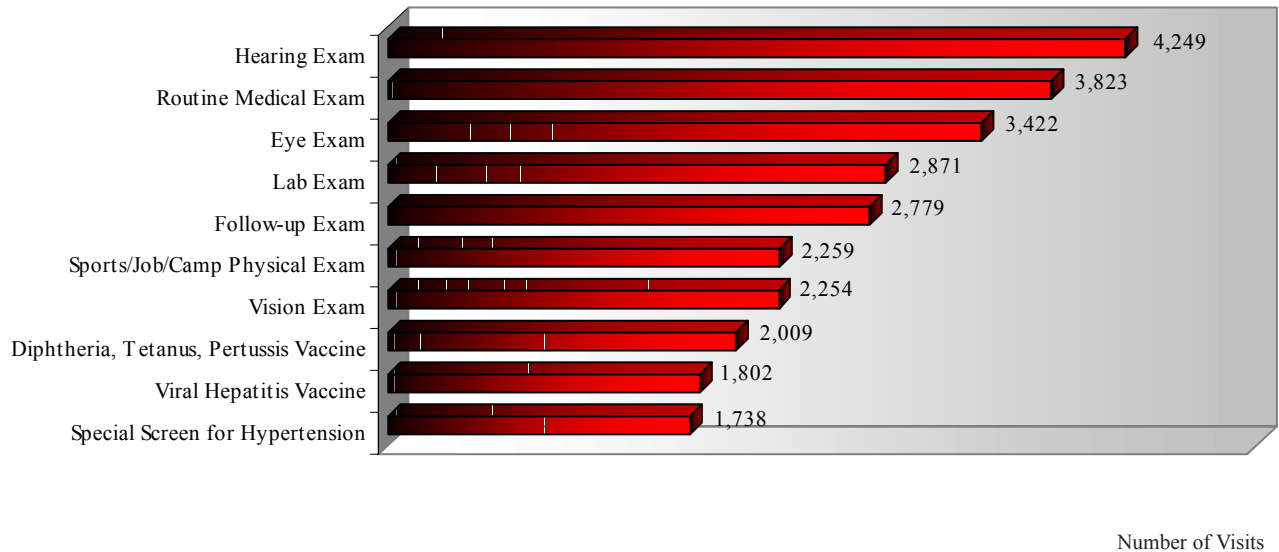
A Glance at 2006-2007 Utilization

38,637 Students Registered at SBHCs
24,945 Students Received Services at SBHCs
120,303 Total Individual Visits Made to SBHCs
4.8 Average Number of Visits Per Student
4,704 Total Visits For Group Counseling

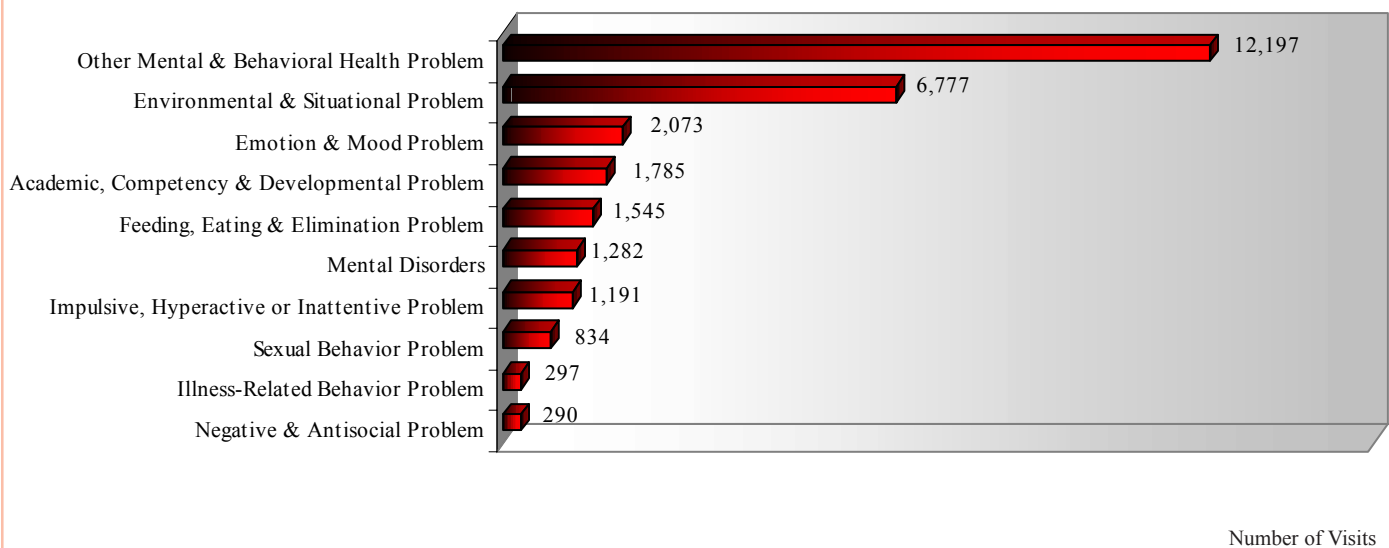
Number of Conditions Seen at SBHCs, by Category



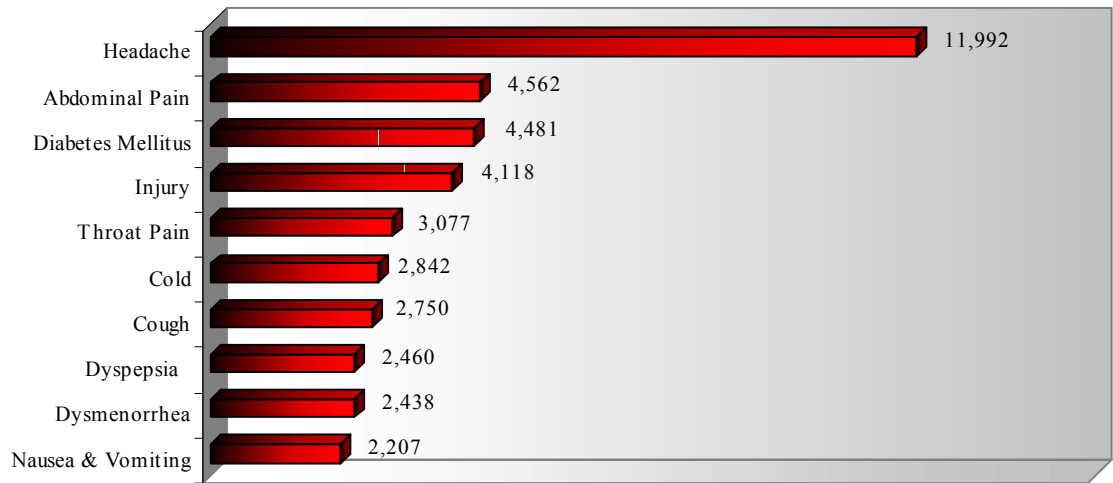
Leading Reasons for General Preventive Medicine Visits



Leading Mental & Behavioral Health Issues Addressed, By Category

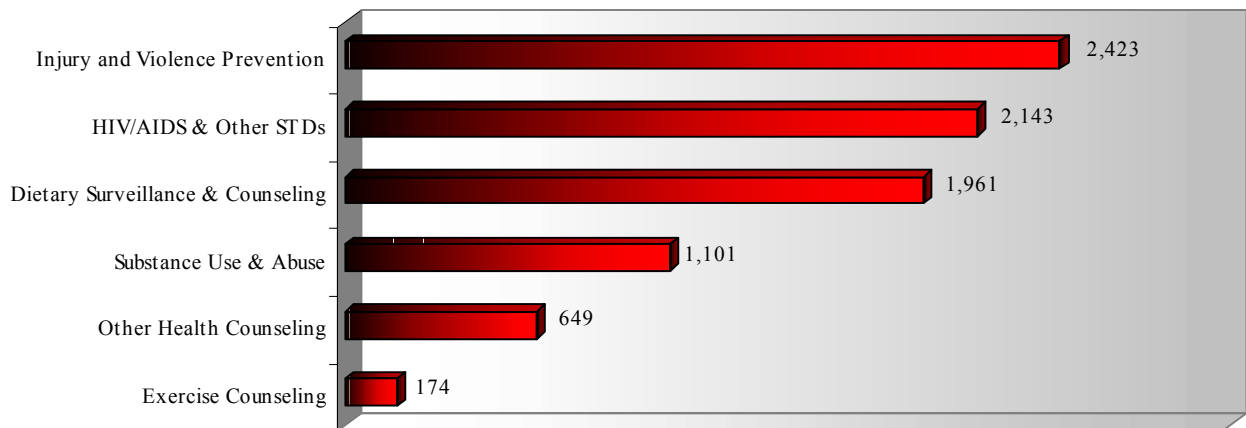


Leading Conditions for Injury and Illness Related Visits



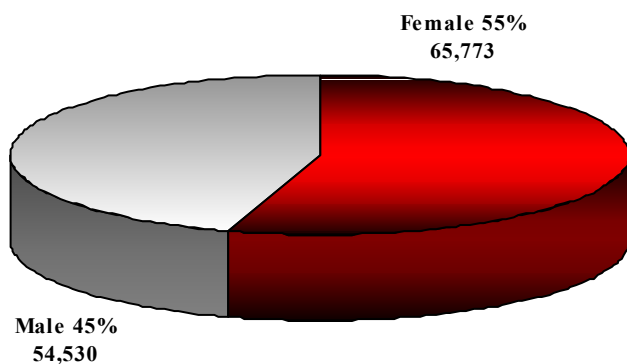
Number of Visits

Leading Reasons for Health Counseling and Education Visits

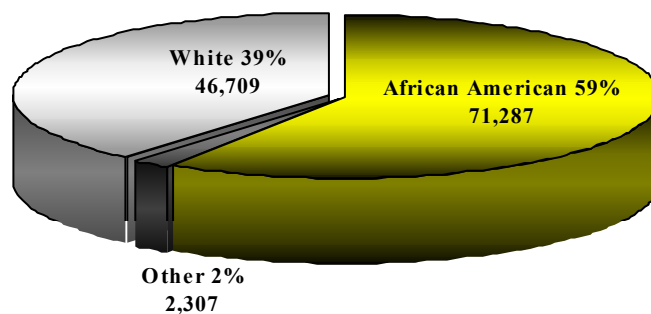


Number of Visits

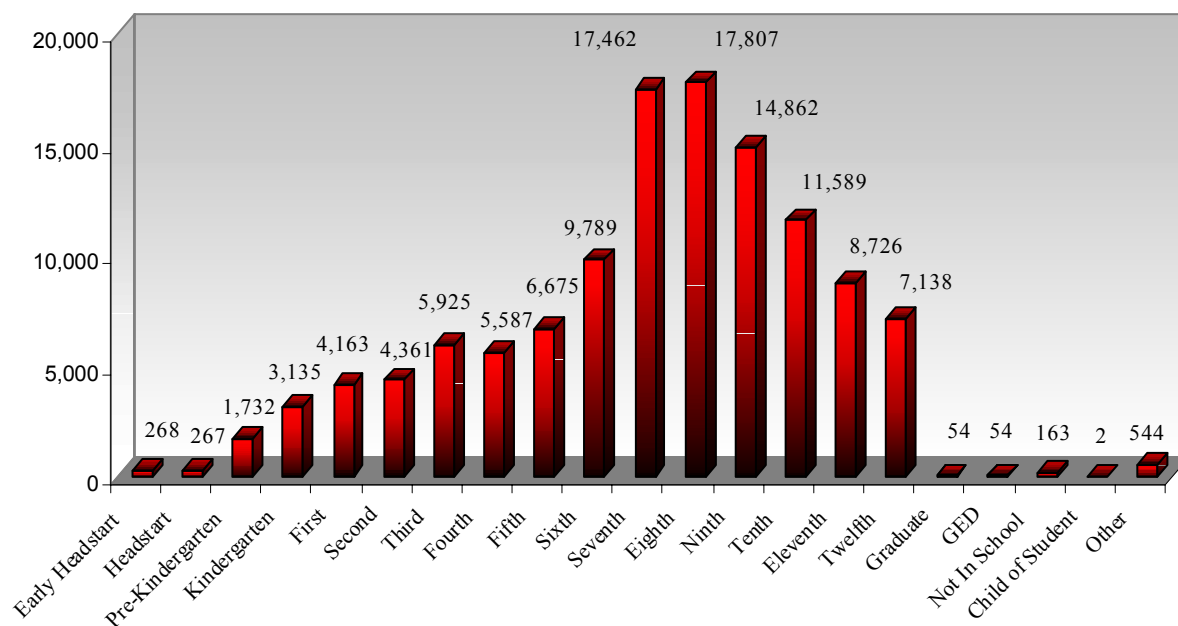
Total Visits, by Sex, 2006-2007



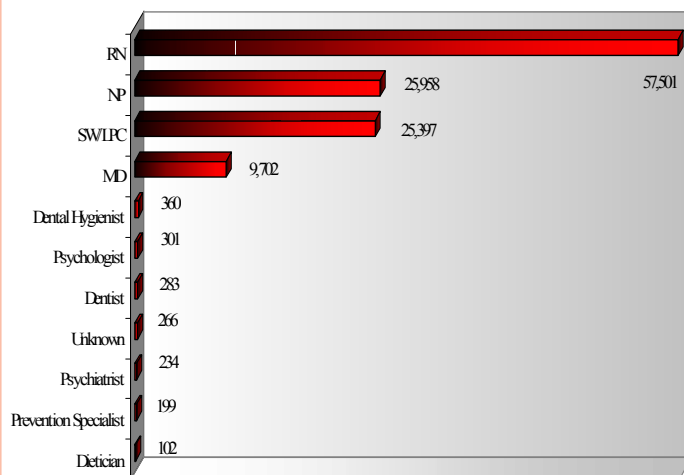
Total Visits, by Race, 2006-2007



Total Visits by Grade for all SBHCs



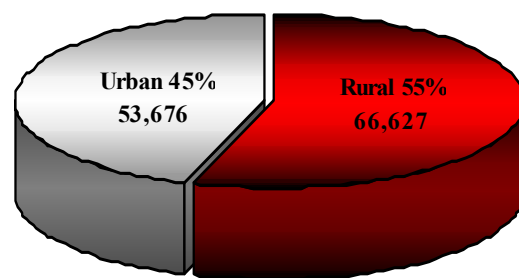
Total Visits by Provider Type, 2006-2007



Services in SBHCs are provided by a multidisciplinary team of professionals who work together to address all aspects of the students' well being: physical, mental, and emotional. (See chart on the left.) All SBHCs are staffed with nurses, primary care providers (nurse practitioners and physicians), and master level mental health professionals. Some SBHCs also have psychiatrists and psychologists. A few SBHCs are able to offer dental services onsite.

Total Visits by Rural and Urban SBHC Sites, 2006-2007

The Adolescent School Health Initiative began in urban schools with high concentrations of economically disadvantaged and uninsured students. However, immediately after its inception, rural communities recognized the immense value SBHCs have toward providing health care services to adolescents otherwise lacking access to such care. While all adolescents experience similar needs, both the obvious and subtle differences can be addressed by the local SBHC because it remains a community-based initiative.



Comparison Ranking of Top 10 Conditions, Rural versus Urban

Rural

1. General Preventive Medicine
2. Mental Health
3. Ear, Nose & Throat
4. Head & Central Nervous System
5. Gastrointestinal
6. Musculoskeletal & Trauma
7. Skin & Subcutaneous
8. Pulmonary & Respiratory
9. Metabolic & Nutrition
10. Miscellaneous

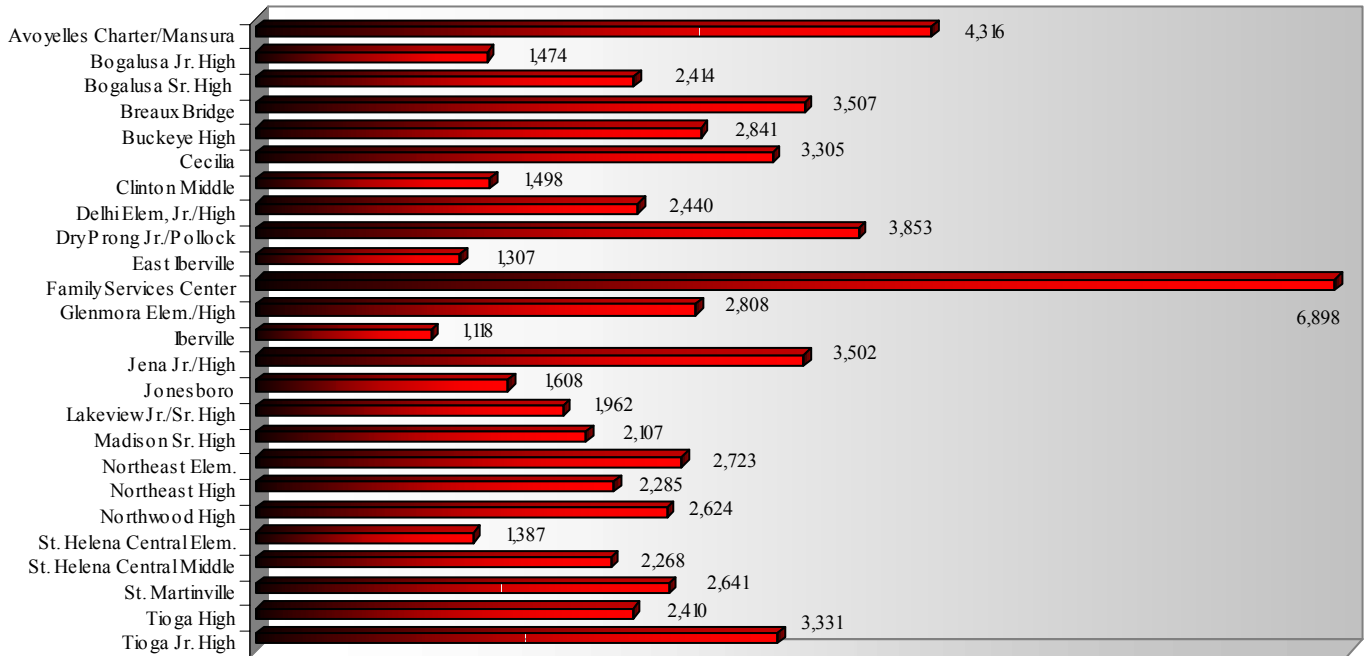
Urban

1. General Preventive Medicine
2. Mental Health
3. Ear, Nose & Throat
4. Health Counseling & Education
5. Head & Central Nervous System
6. Skin & Subcutaneous
7. Musculoskeletal & Trauma
8. Gastrointestinal
9. Pulmonary & Respiratory
10. Metabolic & Nutrition

Total Student Visits by Site, 2006-2007

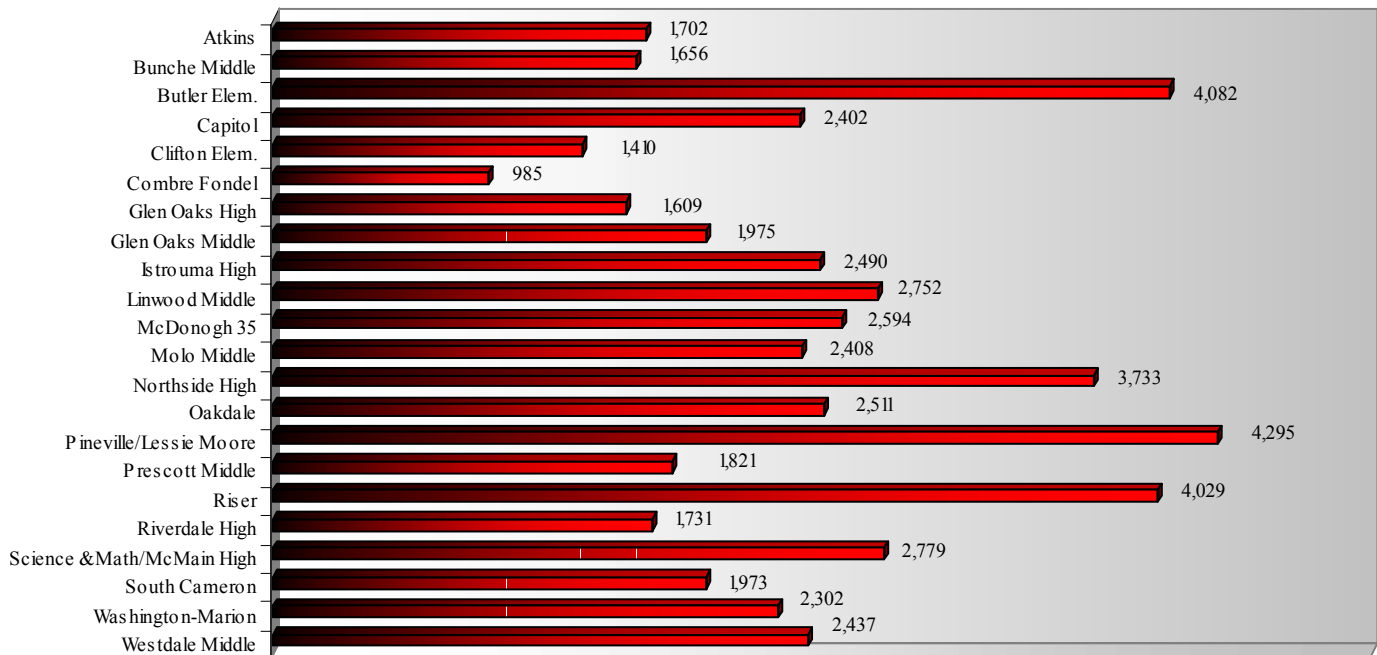
(This includes 4,704 visits for treatment intervention groups.)

Rural Sites



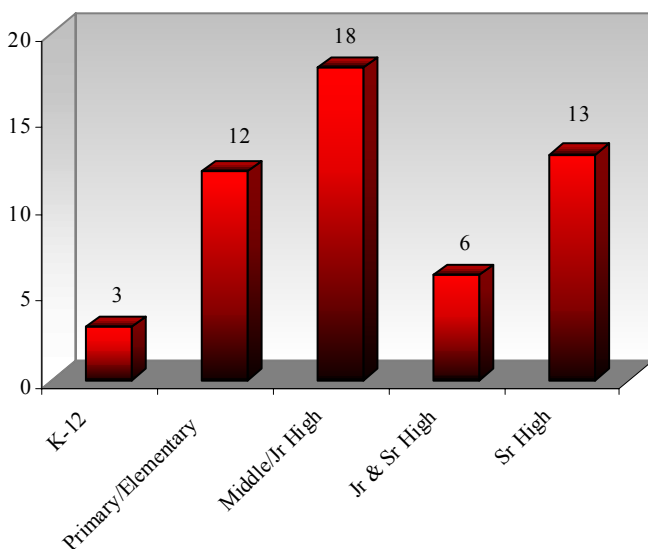
Number of Visits

Urban Sites



Number of Visits

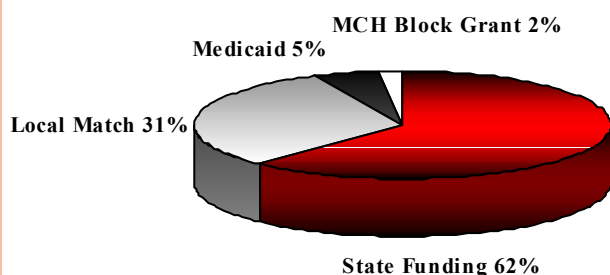
Type of Schools That House SBHCs



Although SBHCs are mandated to serve middle and high school students, children in primary/elementary schools are also served by these “feeder” locations. (See Visits by Grade on page 16.) In some areas, SBHCs are located on primary/elementary school campuses when no space is available at nearby middle or high schools (left).

The primary reasons OPH funds SBHCs are: (1) that need was demonstrated and (2) lack of access to care. With the implementation of Louisiana’s Children’s Health Insurance Program (LaCHIP), more and more students are now insured (see below).

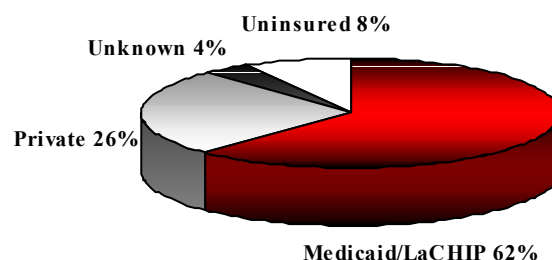
Sources of SBHC Funding



For every dollar the state invests in SBHCs, an additional 61 cents is provided by other sources, including the local communities, federal and private grants, and Medicaid. The local match of 20% is a requirement of the OPH grant, which these communities consistently exceed.

Recognizing that adolescents often delay or avoid seeking needed health services in traditional settings, the Louisiana Medicaid Program designated SBHCs as a unique provider type in Louisiana’s Community CARE Program in 2004-05.

Insurance Status of Those Using the SBHC



Type of Sponsorship for each SBHC

